

# Community Therapeutic Services Limited

# Ellenborough Court

## Inspection report

3 Ellenborough Crescent  
Weston Super Mare  
Somerset  
BS23 1XL

Tel: 01934424262  
Website: [www.cts-homes.co.uk](http://www.cts-homes.co.uk)

Date of inspection visit:  
11 April 2016  
22 April 2016

Date of publication:  
08 June 2016

## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

We inspected this service on the 11 April 2016. This was an unannounced inspection. At our last inspection in July 2013 no concerns were identified.

Ellenborough Court provides accommodation and personal care for up to five people who had a learning disability, autism and or mental health needs. It does not provide nursing care.

At the time of this inspection there were five people living at the home. Ellenborough Court has five individual flats that have their own bathrooms, toilets, kitchens, lounges and bedrooms. There is also a staff room, staff sleeping in room, staff toilet, office and storage room. There is a front garden which has an outdoor seating area.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are registered persons. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The registered manager was not present during the inspection.

People, staff and relatives felt the home was safe and incidents and accidents were audited with actions taken when required. People received their medicines safely and when required by staff who had received training. People had detailed risk assessments and guidelines in place for staff to follow.

People were supported by staff who had appropriate checks in place prior to commencing their employment. People were supported by adequate staffing levels and staff supported people in a kind and caring manner. Staff demonstrated they knew people well and felt supported and able to raise any concerns with the registered manager and the deputy manager.

People received a service that was based on their personal needs and wishes. Changes to people's needs were identified with referrals to appropriate health professionals when required. People felt able to make requests about their care and express their wishes. People who were unable to consent to care and treatment had completed assessments and best interest decisions paperwork in place that involved significant others.

People were able to receive visitors whenever they wished. Relatives were able to visit as often as they liked; people often visited their parents at weekends. People were supported by staff who received regular supervision and training to ensure they were competent and skilled to meet their individual care needs. The service and staff put people central to the care and support they provided. This was reflected in staff values and practice.

People, relatives, staff and health professional's views on the service were sought so that improvements

could be made. People and their relatives felt happy to raise a complaint with the provider or the deputy manager. There was a quality assurance system that monitored the service and identified areas for improvement.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

Good ●

The service was safe.

People, relatives and staff felt the service was safe. Staff had received training and knew who to contact should they have any concerns.

People's medicines were being safely managed and staff had received training to ensure they were competent in administering people's medicines.

People had detailed care plans and risk assessments which gave staff clear guidelines to follow in relation to people's care and safety.

Recruitment procedures ensured people were supported by staff who had adequate checks prior to commencing their employment.

### Is the service effective?

Good ●

The service was effective.

People were supported by staff who received regular supervision and training to ensure they were competent and skilled to meet people's individual care needs.

People were supported by staff to make decisions about their care in accordance with current legislation and were supported to see health care professionals according to their individual needs.

People were supported to have choice and control around their meals and staff supported people with their shopping.

### Is the service caring?

Good ●

The service was caring.

People received personal care that reflected their individual wishes and people were supported by staff who were kind and caring.

People were supported to make decisions and to maintain relationships with friends and family.

People were supported by staff who promoted people's independence and individual needs.

### **Is the service responsive?**

**Good** ●

The service was responsive.

People and relatives felt able to make a complaint should they need to the provider or the deputy manager.

People were supported in activities of their choice and care plans were comprehensive giving staff clear guidelines to follow.

People participated in their assessment and planning of their care and staff had daily hand over so they were familiar with any changes to people's care.

### **Is the service well-led?**

**Good** ●

The service was well-led.

There was a quality assurance systems that identified any shortfalls and actions required.

People were supported by staff who felt well supported and happy.

There was a system in place to ensure, people, relatives and professionals were sent an annual survey so that improvements could be made to people's care.

# Ellenborough Court

## **Detailed findings**

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This was an unannounced inspection that took place on the 11 April 2016. It was carried out by one inspector and a specialist professional advisor in mental health and learning disability services.

We spoke with four of the five people living at Ellenborough Court and three relatives about the quality of the care and support provided. We spoke with the deputy manager and six staff. We also spoke with one health care professional to gain their views of the service.

We looked at four people's care records and documentation in relation to the management of the home. This included three staff files including supervision, training and recruitment records, quality auditing processes and policies and procedures. We looked around the premises, observed care practices and the administration of medicines.

Prior to the inspection we reviewed the Provider Information Record (PIR) and previous inspection reports. The PIR is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We also reviewed the information we held about the service and notifications we had received. A notification is information about important events which the service is required to send us by law.

# Is the service safe?

## Our findings

The service was safe.

People felt safe living at Ellenborough Court. They told us, "I feel safe", "I feel safe here" and "I can trust them [staff], I feel safe here". Relatives felt people were safe. They told us, "Yes, I feel [Name] is safe there" and "Yes, very safe there". One member of staff also felt people were safe. They told us, people are "Safe yes".

Staff were able to demonstrate their understanding of abuse and what they would do should they have any concerns. There was a safeguarding adult's policy on the staff notice board that all staff had access to. Staff said they had received training and training records confirmed this. The deputy manager was able to confirm who they would report any concerns to.

People received their medicines safely and when they needed them. One person confirmed they were happy with how their medicines were administered. They told us, "They do my tablets and explain what they are for and they help to calm me". The home had a medicines policy and all ordering, storage and disposal was in accordance with it. People had their medicines locked safely in their flat. All medicines that required stricter controls by law were stored securely and accurately documented. The two Medication Administration Records (MAR) we reviewed had been correctly completed. Monthly medicines audits were completed and recorded and an action plan produced if improvements were necessary.

All staff who dispensed medicines had received appropriate training prior to administering medicines. Staff received formal training and observations to ensure they were competent. Observation included watching staff administer and check medicines safely. Staff also had occasional 'spot' checks to review their practice. An external audit from the local pharmacy had been conducted in October 2015. All was found to be satisfactory. One person was receiving their medicines covertly. There was authorisation in place from the person's GP to support staff in administering the person's medicines in this way.

People had a medication folder in their flat that contained information on why a medicine had been prescribed, what the medicine was for and any possible side effects. This information allowed staff to understand the person's medicines and allowed them to support people with any questions they might have about their medicines.

People were supported by adequate staffing numbers to meet their needs. We reviewed the recruitment for the home and found people were supported by staff who had checks completed on their suitability to work with vulnerable people. Staff files confirmed that checks had been undertaken with regard to criminal convictions, obtaining references and proof of identity. The deputy manager confirmed part of recruiting the right person was for them to come and meet people. They felt this was a good way to see how applicants engaged with people and an important part of staff demonstrating the required skills and values. Rotas identified vacancies in the staff team. The deputy manager confirmed overtime was made available to staff and agency staff were used as a last resort. One member of staff we spoke with confirmed they often picked up additional shifts. During the day of our inspection all people were supported by adequate numbers of

staff to enable them to have their individual support and care. We observed the deputy throughout the day also supported people when required.

People's care plans included detailed and informative risk assessments. These were individualised to the person and provided staff with a clear description of any identified risk and specific guidelines on how people should be supported in relation to their identified risk. All staff demonstrated they knew people well and confirmed how they supported people inside the home and whilst in the community. People's Care Plans confirmed these arrangements.

People lived in individual flats. There were certificates relating to gas safety and electrical appliance testing in place. People had their own personal evacuation plans in place for emergency situations and easy read versions in their flats. Plans confirmed what support the person would need from staff and any communication needs they had. There was a detailed fire risk assessment that identified contact numbers and where emergency cut off points were for gas and electricity supplies.

# Is the service effective?

## Our findings

The service was effective.

People's consent to care and treatment was sought in line with legislation. The provider was following the principles of the Mental Capacity Act 2005 (MCA) and care plans reflected people's mental capacity or best interest decisions made. For example in relation to receiving support with attending appointments, their finances and medication. The MCA provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. The application procedures for this in care homes are called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty were being met. At the time of our inspection all people in the home had restrictions placed upon them which might be a deprivation of their liberty. The correct guidance had been followed and applications submitted to ensure this restriction was lawful and in each person's best interests.

People were supported by staff who received regular supervision and appraisals. Supervisions were monthly and appraisals annually. These were an opportunity for both staff and the manager to discuss their work and development opportunities. All staff had signed a supervision agreement that clarified the role and responsibilities of the supervisor and supervisee so they both know what was expected of them. Staff told us, "I get regular supervision but if I needed to talk to the manager or shift leader I can" and "We have a great support system, we are a good team and have great communications. It's fantastic here. I get supervision regularly and they have been useful". The deputy manager confirmed annual appraisals for 2016 had all been booked for the next three months. Records confirmed these bookings.

People were supported by staff who had received training in order that they could carry out their roles safely and effectively. Staff training records confirmed this. All staff were happy with the training they received. They told us, "I am confident in the system for training", "My medicines training gave me the confidence to give medicines. The training is really good" and "We get good training, I know about abuse, whistleblowing, the mental capacity act and safeguarding". Staff were able to demonstrate their understanding of training undertaken. Staff were sent policies monthly that they had to read and sign. Policies included whistleblowing, safeguarding, the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards had been circulated and signed as read.

New staff completed a two week induction process. Their induction included specific training, personal care and health and safety. Staff confirmed the induction had prepared them for the job. They told us, "The two week training had been positive" and "Training was good when I started". This ensured staff were suitable

and had received their induction successfully. New staff also attended a three day course on positive behaviour techniques. Positive behaviour techniques training provides staff with the knowledge and interventions they might need should a person become upset or distressed. This meant staff had received training and an induction that prepared them for their new role.

People had individual meals they liked. People told us, "I get choice in what I eat", "The foods nice, I sit down and [Name] cooks. I help with preparation and washing up" and "I cook my own food with a bit of help. It's what I fancy on the day". Meals were provided flexibly and in people's own flats. We observed one person decided in the morning they wanted to eat lunch out. Another person had a set two week menu which they went shopping with staff for. The deputy manager confirmed the menu had evolved over a number of years and reflected the food they liked.

People were supported by staff who knew their communication needs well. Staff spoke with people in a relaxed and reassuring manner. At times staff would speak to people in what they called 'bite size' chunks. Staff and the deputy manager confirmed this was so people had effective communication that was specific and to the point. Staff attended training so they had the skills and knowledge to enable them to provide communication in this way. Staff demonstrated they could interpret non-verbal communication and during the inspection they shared this with us and between themselves.

The home arranged for people to see health care professionals according to their individual needs. People saw their GP and were supported to attend appointments such as speech and language and dental appointments when required. Care plans confirmed people were supported when required with their appointments. One health professional we spoke with confirmed this arrangement.

# Is the service caring?

## Our findings

The service was caring.

All people were happy with the care and felt staff treated them with kindness. They told us, "I am happy here", "I like being here", "I like living here, it's nice, I like everything", "They are kind" and "I like it here the staff are kind and they help me". Relatives felt the care was, "Excellent" and "Care and support is good".

People felt staff treated them with dignity and respect. They told us, "Yes they do (treat me with dignity and respect) they are excellent", "I'm treated with respect and dignity. Staff were able to demonstrate how they provided dignity and respect. They told us, "I always knock before I go into someone's flat" and "I always ask [Name] if it is okay to come in to their space whilst I provide personal care. I make sure curtains are shut and blinds, towels are ready and bath mats down and I always knock on the door".

People were supported to make decisions and choices about their care and support. They told us, "I get choice in what I do", "I feel involved with my care and I have seen my care plan", "I do personal care myself, yes, I think I do get choice" and "I do a lot for myself". Staff demonstrated how they gave people choice and how they knew people's likes and dislikes. For example one person enjoyed watching morning TV and movies. The staff member offered a choice to the person so they could decide what they preferred to watch on the day of the inspection. Another member of staff told us, "It is how [Name] wants to spend their day and what [Name] wants to do". People's care plans had a list of their individual preferences. One person liked riding bikes and keeping in contact with their family. People made choices about where they wished to spend their time. Some people preferred to stay in their flats and others spent time out in the community. One relative confirmed how one person preferred baths to showers. They confirmed a bath had been put into their flat so they could enjoy having baths. This was confirmed in the person's care plan. Another relative felt people had choice. They told us, "[Name] gets choice they decide what they want each day".

Relatives were mostly complimentary of the care and felt supported to maintain relationships with people living at Ellenborough Court. They told us, "I am unable to visit, but [Name] comes to see us. Staff bring them", "[Name] comes to visit us, they bring [x]" and "I visit pretty regularly. Whenever I want. There is never a problem with that". However two relatives felt some of the changes in staffing had been disruptive to people's care. They told us, "There has been a lot of staff turnover. This has affected [Name] with them being upset at times" and "Staffing issues have been quite disruptive to [Name] routine and behaviour". Both relatives were able to confirm the people's key workers had remained consistent even though there had been other staff changes.

People were supported by staff who promoted people's independence and individual needs. This was confirmed by people's individual personalised care plans. For example people enjoyed choosing their meals and planning their shopping lists as well as visiting friends and attending social activities. One member of staff told us, "People are not just a name or number they are an individual. It isn't all about they can't do this or that. It is about the positive aspects of what they can do".

## Is the service responsive?

### Our findings

The service was responsive.

People and their relatives felt able to make a complaint should they need to. There was a complaints policy in place but no complaints had been received in the last six months. One person told us, "I would know who to tell if I wasn't happy". All relatives felt able to raise any complaints should they need to and confirmed they would speak to the deputy manager or the provider if required. One relative confirmed when they had raised a concern it was not taken seriously until raised with the provider but following this they felt fully satisfied. The deputy manager confirmed all complaints were initially responded to within 48 hours and any learning would be shared with staff. They also confirmed that compliments were sought and three had been received from staff working in the service.

People were well supported having one to one or two to one support from staff for their activities. Activities reflected what was important to that person. Not all people had a planned activity timetable but staff confirmed that they give the person a choice each day so they could decide what they wished to do. For example one person liked to go into the community, another person liked to spend time socializing. Another person enjoyed spending time videoing the local community and uploading it to their computer.

People had detailed care plans and they provided staff with guidance on each person's individual needs. Details of people's needs were comprehensive and included guidelines for staff to follow. For example care plans included people's individual health needs, what they would like to achieve and long term aspirations, leisure activities and their sleep and wellbeing needs. Staff demonstrated they knew people well and were able to give examples of how they supported people with these needs.

People participated in the assessment and planning of their care. The deputy manager, staff and relatives all confirmed people were part of their reviews. Care plans confirmed reviews were held with people and their relatives were involved when required. Reviews were held every 6 months. Relatives were happy that people had their reviews and that their care reflected their wishes. They told us, "I get yearly invites and I get as involved as I need to" and "No we don't go to the annual reviews as we don't get involved any changes they would contact us, [Name] makes their own decisions".

There was a staff hand over between shifts. This was an opportunity for staff to discuss each person so that the next staff team were fully aware of who was at the home and how they were that day. This meant people were supported by staff that were up to date with any important information.

People were supported to attend health care appointments. Two relatives confirmed how the service ensured people had support and access to appointments when required. They told us, "[Name] has been supported well to access an appointment" and "They support with all appointments, they are good like that". One health care professional confirmed how one person was being supported well by the service with all their appointments. They also confirmed this information was always available when they asked and at the person's care review.

# Is the service well-led?

## Our findings

The service was well-led.

Ellenborough Court was managed by a registered manager who was also the provider. They were supported by a deputy manager. Staff and relatives felt the service was supportive and well-led. Staff told us, "We have a great support system", "We get feedback in handover and get lots of support and a debrief after any incident" "I think we are a good team" and "The managers are approachable". Relatives told us, "If I had any problems I would go to the owner" and "We see the manager if we need to. I would always ring which I do occasionally".

Staff were happy and felt it was a nice place to work. They told us, "I love it. It's a really nice place to work", "It's fantastic here I like working here because I like supporting people" and "It's a good place". Staff had daily handover meetings which allowed staff opportunities to raise any issues or concerns. The last formal staff meeting minutes confirmed staff were given the opportunity to have a 'voice and drive the service forward'. The deputy manager confirmed they planned to arrange regular formal staff meetings for the rest of 2016.

People, relatives, staff and professionals all had their view sought on the care provided at Ellenborough Court. Questionnaires were sent annually. Out of the returned questionnaires 75% of responses indicated that the service was 'good' and 25% said it was 'excellent'. Relatives confirmed they had been sent an annual questionnaire. One relative told us, "I get sent one every year, but only the last one I filled in did I get any feedback from the manager about my comments". Questionnaires had also been sent to a variety of external professionals including GPs, dentists and psychologists but none had been returned. The recent staff questionnaire results were going to be collated by an outside agency and were not available at the time of our visit. One staff member confirmed this. They told us, "We have had a questionnaire from an independent agency plus other questionnaires.

There was an effective quality assurance system in place to monitor care and plan on going improvements. The deputy manager confirmed there was a monthly audit undertaken when they walked around of the service. The last completed audit was undertaken in March 2016. It monitored health and safety, the building's condition, fire drills test and gas safety and legionella's certificate, incidents and accidents and had a clear action plan identifying areas of improvement. The deputy manager confirmed this would then be discussed at the management meetings so that work could be prioritised. There was also a business plan that confirmed regular audits would feed into the service development plan. The business plan also identified improvements the provider planned to implement over the next 12 months.

The deputy manager confirmed the vision and values started at the interview process for new staff. They told us how important it was that staff came with the ability to "Communicate well and have the right attitude". Interview notes confirmed staff were asked to demonstrate how they would, support and enable people, be non-judgemental and value people. This was also confirmed by the provider's statement of purpose. A statement of purpose sets out what the business will do, where it will be done and for whom. The

statement of purpose confirmed, "People should be treated as a whole person, with compassion, dignity and respect". Staff we spoke with also confirmed people were at the centre of the care they provided.